

PART B - FEE(S) TRANSMITTAL

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22850

7590

05/27/2009

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CUSTOMER NUMBER
22850

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/528.814

04/19/2005

Masaomi Iyo

268519USOPT

4204

TITLE OF INVENTION: DIAGNOSTIC AND EXAMINATION METHOD FOR EATING DISORDER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1510

\$300

\$0

\$1810

08/27/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
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HAYES, ROBERT CLINTON

1649

435-007920

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.163).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Oblon, Spivak,

2. McClelland, Maier

3. & Neustadt, L.L.P.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for application as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Masaomi IYO

Chiba-shi, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorizing Signature

Date

Typed or printed name

Registration No.

James D. Hamilton

8/21/09

Registration No. 28,421

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